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APPLICANTS

Todd Siegel, Clearwater, FL;

Stuart Bagley, Clearwater, FL;

Michael Stevenson, Clearwater, FL;

** CONTINUING DATA *****

This application is a CIP of 60/133,647 05/11/1999

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** FOREIGN APPLICATIONS *****

NONE

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/13/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 7	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS ST		
Verified and Acknowledged				

ADDRESS

33448

ROBERT J. DEPKE

LEWIS T. STEADMAN

TREXLER, BUSHNELL, GLANGLORGI, BLACKSTONE & MARR

105 WEST ADAMS STREET, SUITE 3600

CHICAGO, IL

60603-6299

TITLE

AUTOMATED SOLID PHARMACEUTICAL PRODUCT PACKAGING MACHINE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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